PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/542761

U.S. NATIONAL STAGE FEES	├	 								<u> </u>			
U.S. NATIONAL STAGE FEES	CLAIMS AS FILED - PART I										OR	OTHER THAN OR SMALL ENTITY	
BASIC FEE							Column 2)	7	DATE	FEE	1		
EXAMINATION FEE Satisfies PCT Article 39(1) All other situations = (4) = \$50 / \$100 \$100 / \$200 \$100 / \$200 \$100 / \$200 \$100 / \$200 \$100 / \$200 \$100 / \$200 \$100 / \$200 \$100 / \$200 \$100 / \$200 \$100 / \$200 \$100 / \$200 \$100 / \$200 \$100 / \$200 \$100 / \$200 \$100 / \$200 \$100 / \$200 \$100 / \$100 / \$100 \$100 / \$	0							┨		1			FEE
SEARCH FEE	BAS	SIC FEE						1	BASIC FEE	100	OR	BASIC FEE	· -
SEARCH FEE	EXA	MINATION FE	E 	(4) = \$50/\$100					EXAM. FEE	100	ĺ	EXAM. FEE	!
TOTAL CHARGEABLE CLAIMS	SEARCH FEE			ALL other countries =					SEARCH FEE	200		SEARCH FEE	
NDEPENDENT CLAIMS	FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 =		X \$ 125 =		ĺ	X \$ 250 =	
### STAND ST	тот	AL CHARGEAI	BLE CLAIMS	8 minu	us 20 =	*			X \$ 25 =		OR	X \$ 50 =	
Total	INDEPENDENT CLAIMS min					*			X \$ 100 =		OR	X \$ 200 =	•
CLAIMS AS AMENDED - PART II	MULTIPLE DEPENDENT CLAIM PRESENT								+ \$ 180 =		OR	+ \$ 360 =	
Column 1)	* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	450	OR	TOTAL	
REMAINING AFTER AMENOMENT									SMALL E	NTITY	OR		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM + \$ 180 = OR			REMAINING AFTER		NUME PREVIO	BER DUSLY			RATE	TIONAL		RATE	ADDI- TIONAL FEE
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM + \$ 180 = OR		Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM + \$ 180 = OR + \$ 360 = TOTAL ADDIT. FFF TOTAL ADDIT. FFF		Independent	*	Minus	***		:=		X \$ 100 =		OR	X \$ 200 =	
(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT Total * Minus *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".	•								+ \$ 180 =		OR	+ \$ 360 =	-
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST NUMBER PRESENT PREVIOUSLY EXTRA AMENDMENT PAID FOR PAID FOR Independent Minus *** =									4		ÖR		-
REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR TOTAL ADDIT. FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM TOTAL ADDIT. * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".	(Column 1) (Column 2) (Column 3)												
Independent * Minus *** = X \$ 100 = OR X \$ 200 = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	MENT		REMAINING AFTER		NUMB PREVIO	BER USLY			RATE	TIONAL		RATE	ADDI- TIONAL FEE
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".		Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".		Independent	*	Minus '	***		=		X \$ 100 =		OR	X \$ 200 =	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".							OR						
COMMISTO 475 (Pay 027005)	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".												